

Part 1: Local Educational Agency (LEA) Information	Agency (LEA) Information
Name of Local Educational Agency	Name of LEA Executive Director (Public Charter Schools Only)
edom Public Charter School	Linda Moore
Full Address of Local Educational Agency	Email Address of LEA Executive Director (Public Charter Schools Only)
: 20017	lindam@ewstokes.org
Main Telephone Number of Local Educational Agency	Telephone Number of LEA Executive Director (Public Charter Schools Only)
	202-265-7237 Ext. 104
Name of Primary LEA Contact for Title III, Part A improvement Plan Addendum (IPA)	Name of Additional LEA Contact for Title III, Part A IPA
David Bravo-Gonzalez	Maura Varley Gutierrez
Position Title of Primary LEA Contact for Title III, Part A IPA	Position Title of Additional LEA Contact for Title III, Part A IPA
ELL Coordinator	Director of Teaching and Learning
Email Address of Primary LEA Contact for Title III, Part A IPA	Email Address of Additional LEA Contact for Title III, Part A IPA
davidb@ewstokes.org	maurav@ewstokes.org
Telephone Number of Primary LEA Contact for Title III, Part A IPA	Telephone Number of Additional LEA Contact for Title III, Part A IPA
202-265-7237 Ext. 115	202-265-7237 Ext. 102
Part 2: LEA	Part 2: LEA Certification
I certify that all of the information contained in this application is true and accurate to the best of my knowledge.	urate to the best of my knowledge.
Additionally, I certify that the LEA agrees to all assurances included in the application.  I have been authorized to file this application on behalf of the agency named above.	lication. 3bove.
Name of Individual Certifying Title III, Part A IPA (Board Chairperson or Charcellor only)	Signature of Individual Certifying Thie III, Part A IPA
Lisa Hall	X. X. M.
Title of individual Certifying Title III, Part A IPA (Board Chairperson or Chancellor only)	Data of Certification (input of the time of signature)
Board Chairperson	12/19/12
SUBMIT <u>BOTH</u> A MICROSOFT EXCEL VERSION OF THIS FULL WORKBOOK <u>AN</u> E	SUBMIT <u>BOTH</u> A MICROSOFT EXCEL VERSION OF THIS FULL WORKBOOK <u>AND</u> A SIGNED, SCANNED COPY OF THIS PAGE BY EMAIL TO <u>CON.APP@DC.GOV</u> .
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